

**COVER PAGE**

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE) 2018 APR -2 PM 4:46

**1. Office, Agency, or Court**

Agency Name (Do not use acronyms)

Duan

Division, Board, Department, District, if applicable

DOGGR, NRA - Department of Conservation

Your Position

Research Program Specialist II (GIS)

► If filing for multiple positions, list below or on an attachment. (Do not use acronyms)

Agency: Position:

**2. Jurisdiction of Office (Check at least one box)**

- ☒ State ☐ Judge or Court Commissioner (Statewide Jurisdiction)  
☐ Multi-County ☐ County of  
☐ City of ☐ Other

**3. Type of Statement (Check at least one box)**

- ☒ **Annual:** The period covered is January 1, 2017, through December 31, 2017.  
-or- The period covered is / / , through December 31, 2017.  
☐ **Assuming Office:** Date assum  
☐ **Candidate:** Date of Election  
☐ **Leaving Office:** Date Left / / (Check one)  
○ The period covered is January 1, 2017, through the date of leaving office.  
-or-  
○ The period covered is / / , through the date of leaving office.  
different than Part 1:

**4. Schedule Summary (must Schedules attached)**

- ☒ **Schedule A-1 - Investments**  
☐ **Schedule A-2 - Investments** - schedule attached  
☐ **Schedule B - Real Property** - schedule attached  
☐ **Schedule C - Income, Loans, & Business Positions** - schedule attached  
☐ **Schedule D - Income - Gifts** - schedule attached  
☐ **Schedule E - Income - Gifts - Travel Payments** - schedule attached

-or-

☐ **None - No reportable interests on any schedule**

pages including this cover page:

**5. Verification**

MAILING ADDRESS STREET CITY STATE ZIP CODE  
(Business or Agency Address Recommended - Public Document)  
801 K Street Sacramento CA 95814  
DAYTIME TELEPHONE NUMBER E-MAIL ADDRESS  
( 916 ) 322-9778 lian.duan@conservation.ca.gov

I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best of my knowledge the information contained herein and in any attached schedules is true and complete. I acknowledge this is a public document.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date Signed 4/2/2018  
(month, day, year)

Signature Lian Duan  
(File the originally signed statement with your filing official.)

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**  
FAIR POLITICAL PRACTICES COMMISSION

Name \_\_\_\_\_

▶ NAME OF BUSINESS ENTITY  
**ALPHABET INC CAP STK CL C (GOOGL)**

GENERAL DESCRIPTION OF THIS BUSINESS  
**Internet company**

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **17**      \_\_\_\_\_ / \_\_\_\_\_ / **17**  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**ALPHABET INC CAP STK CL A (GOOG)**

GENERAL DESCRIPTION OF THIS BUSINESS  
**Internet company**

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
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IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / **17**      \_\_\_\_\_ / \_\_\_\_\_ / **17**  
 ACQUIRED      DISPOSED

▶ NAME OF BUSINESS ENTITY  
**AT&T INC COM USD1**

GENERAL DESCRIPTION OF THIS BUSINESS  
**Telecommunication Services**

FAIR MARKET VALUE  
☒ \$2,000 - \$10,000      ☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000      ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock      ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership      ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

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 ACQUIRED      DISPOSED

Comments: \_\_\_\_\_